

NO. ~~SPR/SP~~ 02-2022

BOURNE TOWN CLERK
APR 17 2 41:45

TOWN OF BOURNE
APPLICATION FOR ~~SITE PLAN REVIEW~~ & SPECIAL PERMIT

DATE: 4-17-24
8 Copies Required

FEE: \$400.00
See Fee Schedule

PLEASE ANSWER ALL QUESTIONS COMPLETELY

I. APPLICANT INFORMATION

1. Owner of Property

Name: Luciana Oliveira
Address: 290 MASSAPOAG Rd, Tynngsboro MA 01879
Phone: 978.549.4412 Email: Luciana@globaldesigngroupinc.com

2. Applicant

Prospective buyer _____ Tenant Licensee _____

Name: CAPE COD TRAILER STORAGE inc
Mailing Address: 155 UNDERPASS Rd, Brewster, MA 02631
Phone: 508-989-4481 Email: JBMCAPE@COMCAST.NET

3. Engineer/Registered Land Surveyor Or Architect (If Applicable)

Name: _____
Address: _____
Phone: _____ Fax: _____
Email: _____

4. Attorney (If Applicable)

Name: _____
Address: _____
Phone: _____ Fax: _____
Email: _____

II. SITE INFORMATION

(For assistance see Engineering Dept.)

Assessors Information

Site Address: 340 MACARTHUR BLVD, BOURNE MA 02532
Map: 31-4 Parcel: 15-0 Lot: -

Zoning District: B-4 Required Area: 7.894 acres Required Frontage: 150 FT
Actual Area: - Actual Frontage: -
Town Sewer (Yes Or No) NO

III. SPECIAL PERMIT INFORMATION

1. Application for Special Permit as authorized by Section 1230 of the Bourne Zoning Bylaw:

APPLICATION FOR SITE PLAN REVIEW / SPECIAL PERMIT PER SECTION 1233C3 - change of used.

2. Generally state or attach information necessary so that compliance with Section 1330 of the Bourne Zoning Bylaws may be determined:

NONE

3. Are you applying for a Special Permit under any other sections of the Bourne Zoning Bylaw: (If yes, please state the section number and reason.)

CHANGE OF USE TO BUSINESS OFFICE, WAREHOUSE INDUSTRIAL FABRICATION PER SECTION 220. APPLICATION FOR WAIVER OF STAMPED PLANS PER SECTION 1235. Yes, we are also requesting a waiver for Applying 106 Natural cover Removal 3570 Site plan review under section 1235.

4. Describe specifically the nature of your request for Special Permit ONLY:

GRANITE COUNTERTOPS INSTALLATION AND FABRICATION.

5. Generally state or attach information necessary so that compliance with the appropriate section of the Bourne Zoning Bylaw may be

6. determined:

Attachments: Waiver Request
Plot Plan: _____ **Certified list of Abutters (2 copies):** _____
Ground floor and/or architectural elevations: _____
Other: _____

For Planning Board Use Only

Planning Board Action

1. Date Submitted to Planning Board: _____
2. 65 Days: _____
3. Time Waiver Signed: _____ Date: _____
4. Fee: Waived? _____ Carried Over: _____
5. Hearing(s) Held: Date(s): _____
6. Decision Date: _____
7. Decision: Approved _____ Denied: _____ Withdrawn: _____
8. Conditions of Approval: (Attach as voted by Planning Board)
9. Date Decision filed with Town Clerk: _____
10. Date Decision forwarded to Building Inspector: _____

7. Vote: _____ in favor _____ opposed

Reviewing Member: _____

Chairman, Planning Board